PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

					000 C	42	-						
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TC	OTAL CLAIMS		(Column		(Colu	umn 2)	TYPE			OR 1			
FO				24			RAT		FEE	1 1	RATE	FEE	
<u> </u>			NUMBER I	FILED	NUMB	BER EXTRA	BASIC	FEE	370.00	OR	BASIC FEE	740.00	
┝	OTAL CHARGEA		1 -			* 4)=	36 -	OR	X\$18≃		
<u> </u>	DEPENDENT CL			inus 3 =			X42:	=		OR	X84=		
MU	ILTIPLE DEPEN	NDENT CLAIM PR	RESENT				+140)=		OR			
* If	the difference	e in column 1 is	less than ze	ero, ente	r "0" in c	column 2	TOTA	71	406	J - 1	TOTAL	 	
	С	LAIMS AS A	MENDED) - PAR	:Τ		•••	,_ I	1900	10,,	OTHER	THAN	
	-	(Column 1)		(Colur	mn 2)	(Column 3)	SMAI	LL F	ENTITY	OR	SMALLE		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RATE	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
<u>Ş</u>	Total	*	Minus	**		=	X\$ 9	_		OR	X\$18=		
ME	Independent	*	Minus	***		=	X42=	1		1	You		
٩	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	T CLAIM			\dashv		OR		 	
			+140:			OR	+280=	l					
			TOT ADDIT. F			OR ,	TOTAL ADDIT. FEE						
		(Column 1)		(Colur		(Column 3)	<u></u>	_					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVIO	HEST MBER OUSLY FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total	*	Minus	**		=	X\$ 9:	=]		OR	X\$18=		
AME	Independent	*	Minus	***	~ 2114	=	X42=	_		OR	X84=		
<u></u>	FIRST PHESE	ENTATION OF MU	JLTIPLE DEP	ENDEN	CLAIM		+140=	_		OR	+280=		
ł							TOT	AL			TOTAL		
ı		(Column 1)		(Colu	O)	(Column 3)	ADDIT, FI	EE L		,011	ADDIT. FEE		
5		CLAIMS		(Colur	HEST			т	ADDI-	ı ,		4001	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID		PRESENT EXTRA	RATE	: ·	TIONAL FEE	, }	RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=	X\$ 9=	-		OR	X\$18=	!	
AME	Independent	*	Minus	***		=	X42=	1		1	X84=		
	FIRST PRESE		-	+		OR							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE		
•	The "Highest Num	nber Previously Pai	d For" (Total or	Independ	ent) is the	highest number f	ound in the	аррі	ropriate box	in coli	umn 1.		